**Rocky Mountain National Park**

**BACKCOUNTRY TRAVEL PLAN**

 **Group:****[ ] Solo:****[ ]**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Date/Time Start:** |  | **Date End:** |  | **Estimated Return Time:** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **ENTRY PT.** |       |  **EXIT PT.** |       |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Leader: |       | Radio# |     | Clothing Description: |       | Pack Color: |       |
| Name: |       | Radio# |     | Clothing Description: |       | Pack Color: |       |
| Name: |       | Radio# |     | Clothing Description: |       | Pack Color: |       |
| Name: |       | Radio# |     | Clothing Description: |       | Pack Color: |       |

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| --- | --- | --- | --- | --- | --- |
| **Re-contact phone#** |       | Supervisor: |       | Supvr. Phone# |       |

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| --- | --- | --- | --- | --- |
| **Communications Devices:** | CELL PHONE# |       | SATELLITE PHONE # |       |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Travel By:** (check all that apply) | Foot: | [ ]  | Ski | [ ]  | Snowshoe | [ ]  | Horse | [ ]  | Snowmobile | [ ]  | ATV | [ ]  |

**Vehicle(s):**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Make/Model: |       | Color: |       | License Plate/State: |       | Parked at: |       |
| Make/Model: |       | Color: |       | License Plate/State: |       | Parked at: |       |

 **Detailed Itinerary:** List travel plan (trails, routes) for each day and where you plan to stay each night. Please be detailed. Use an additional sheet if necessary.

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 **Risk Management Considerations** (Examples: glacier/snowfield travel, helicopter operations, river crossing, solo travel, high country travel, weather forecast) :

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 **Equipment:** Compass [ ]  Map [ ]  GPS [ ]  Signal Mirror [ ]  Flare [ ]  Whistle [ ]  Flashlight/Headlamp [ ]

**(***check in* all First Aid Kit [ ]  Reflective Marker [ ]  Space Blanket [ ]  Locator Beacon [ ]  Helmet [ ]  Ice Ax [ ]

*applicable***)**  Shelter/Bivy Gear [ ]  Avalanche Beacon [ ]  Probe Pole [ ]  Shovel [ ]  Rope [ ]

|  |  |  |  |
| --- | --- | --- | --- |
| Weapon(s) (specify): |       | Other(specify): |       |

**Equipment Identifiers:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Tent Color(s): |       | Tent Fly Color(s): |       | Helmet Color(s): |       |

**Please describe any known or suspected problems with radio contact that you anticipate:**

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**Additional information:**

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**Comm. Center Received (**date/time/initials)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. ROMO 7 REV 3/16/06